PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

1095.1182

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			14				1	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/ % minus 20=		• Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			→ minus 3 =		* Ø			X40=		OR	X80=	,
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT	SENT				+135=	,	OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	"0" in column 2		TOTAL		ÓR	TOTAL	
	C	LAIMS AS A	MENDED - PART II				,				OTHER THAN	
		(Column 1) CLAIMS		(Colu	mn 2) (Column·3)			SMALL		OR	SMALL	
AMENDMENT		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 10	Minus	2		= /		X\$ 9=	-	OR	X\$18=	
	Independent	2	Minus	*** 5	3			X40=		OR	X80=	<u>.</u> #5*
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR						.	÷135=		OR	+270=	٠٠ سال
							. J	ADDIT. FEE		OR	TOTAL ADDIT: FEE	
	(Column 1) (Column 2) (Column 3)							1			= 1	
AMENDMENT B		CLAIMS REMAINING PAFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI-7 TIONAL FEE
	Total		Minus	***		±		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	: :	=		X40=		OR	X80≟	and B
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							/405	* 9	4.		4
				•	- 1			<i>∱</i> 135=	-	OR	+270= .	
			•				.*	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)				· · ->	· · · · · · · · · · · · · · · · · · ·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 1	Minus	**		=]	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		= ;	<u>.</u>	X40=	-	OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										€ ₀ -70	
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+135= TOTAL	, ,	OR 	+270=	
-	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	ADDIT. FEE	L
1		mber Previously Pa						und in the app	propriate bo	x in co	lumn 1.	